## City of Temple Dangerous Dog Affidavit

Name:		A	.ge:	Sex	c: ☐ Male	Fe	male
Address							
(Street)	(City)	(State)	(Zip)				
Phone Number: (W) ( )		(H) (    )		(C)			
Parent/Guardian Name (If Victi	m under 18):						
Description of Attacking Anii	mal						
Name, if known:		Species:		Breed:			
	nt occurred (Be spec	Time(s) of Inc ific: i.e. address and w	cident: here on premises	s)			
Was the animal confined or res	strained at the time o	of the incident?			□ Ye	s 🗆	No
Did the animal make physical	·						
that the animal was going to a	ttack you and cause	bodily injury?			□Ye	<b>S</b> [	□No
	Phone Number: (W) ( )  Parent/Guardian Name (If Viction Description of Attacking Animal Name, if known:  Incident Information Date(s) of Incident: Physical location where incide  Was the animal confined or restant Animal versus Human Did the animal make physical  Please describe in detail any indocumentation which may be  If there was no contact between that the animal was going to a	Phone Number: (W) ( )	Phone Number: (W) ( )	City   (State)   (Zip)	Phone Number: (W) ( )	City   City   (State)   (Zip)	City   (City)   (State)   (Zip)

(Continued On Back)

## V. Animal versus Animal

			ness the attack?		
		e the attacking animal in any way by entering its primary place of habitation or territory? ed at the time of the incident?			
-	After the attacking animal m	nade contact with your animal, des	cribe how the contact ended:		
			addition, please attach pictures and any su tion of this incident		
	litness Information	ation for any witnesses who may t	estify about this incident:		
١	lame:				
Α	ddress: (Street)	(City)	(State)	(Zip)	
F			Phone: (C)		
١	lame:				
Ρ	.ddress:				
F	(Street)	(City)	(State) Phone: (C)	(Zip)	
	Name: Address: (Street)	ol of Attacking Animal (Possible (City)	•	(Zip)	
			.,,		
	Signature I swear that the above inform	rmation is true and correct to the b	pest of my knowledge.		
	(Complainant/\	ant/Victim)		(Date)	
	(Parent or Guardian, if vi	ictim under 18)		(Date)	
	SUBSCRIBED AND SWO	RN TO BEFORE ME by the said _			
	On thisda	ay of	, 20		
	My Commission Expires:				
			No	tary Public in and for the State of Texas	

PLEASE RETURN TO:

Temple Animal Services 620 Mama Dog Circle Temple, TX 76504